

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
457
Bu. Vou. No. _____

U. S. COST REIMBURSABLE
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To _____
(Payee)

PAID BY

SAPC 10271
COPY 10E 2

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				4,377	42

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total \$ 4,377 42

I certify that the above bill is correct and just and that payment has not been received.

STATINTL (Sign original only)

Date 10-18-56 *Payee _____
(Date not required when a like certificate is made by payee on attached bill or bills)

Per _____ Title Controller

Amount verified; correct for _____
(Signature or initials) JAS

4,377 42

Contract No. A101 Date _____ Req. No. _____ Date _____ Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____
By _____
Title APPROVING OFFICER NOV 9 1956

SIGN
ORIGINAL
ONLY

† _____
Title _____
Date _____
10/30/56
10/31/56

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

STATINTL

STATINTL

STATINTL

Paid by { Check No. _____ dated _____, 19____, for \$ _____ (on Treasurer of the United States in favor of payee named above.)
Cash \$ _____, on _____, 19____ Payee _____
(Sign original only)

* When a voucher is prepared by a contractor, the contractor must appear in the space provided for the signature of the approving officer, writing the company or corporate name, as well as the capacity in which he signs, must appear. For example, "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and _____
Title _____

CONTINUATION SHEET

U. S. _____ COST REIMBURSABLE _____

Sheet No. 1 of Bureau Voucher No. 457

(Department, bureau, or establishment)							
No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Contract A101 - Costs applicable to all systems					
		Direct Costs Properly Chargeable to Contract A101 for the period 10-1-56 thru 10-7-56				STATINTL	
		Labor Week Ending October 7, 1956					
STATINTL		Overhead computed for Communications Division at interim rate of					
STATINTL							
		Other Costs - per schedule attached				37	26
		Total Labor Overhead and Other Costs					
		G & A expense computed at interim rate of					
		Total Costs				\$ 4,377	42
		STATINTL					
						STATINTL	

NTS PAID

☐ CONSOLIDATED DISTRIBUTION REPORT
☐ ADJUSTMENTS
☐
10/7/56
DATE1
PAGEPOSTING JOURNAL
DIVISIONS

REPORT NO.

RECEIVING REPORT NUMBER	C.E. CODE	CHARGE DISTRIBUTION				DISTRIBUTION AMOUNT
		ACCOUNT	M.J.O.	S. O.	WORK ORDER	
1	5	12700	5032	10		2202
3	5	12700	5032	10		1174
						3376
	5	12700	5032	10		350
						350
						3726
						3726
						<u>3726</u>